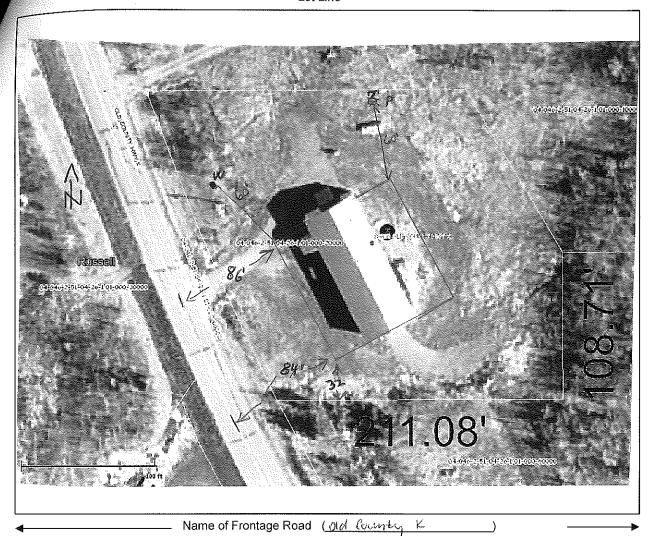
## BAYFIELD COUNTY SANITARY PERMIT APPLICATION



Zoning District \_\_\_\_\_\_

A STATE OF THE PROPERTY OF THE	formation)	ON			Soil Test No:		Cour	ity iit No:			
Property Owner's N	ame:		R E	GEI	-74	<i></i>					
NICHEVO A	ERRY ,	LINES,	Me E	W E F	County:	13-03	<i>Y</i> 64	Bayfi	ield		
Address of Property	<i>r</i> :		ll no	T 142		_ocation:					
89850 Old	County	Hory	K	/:	NE 1/4	NE 1/4, S	8 <i>26</i> T 3	۲/ N,	R4	Æ	₹ (or) W
89850 Old County Hwy K Property Owner's Mailing Address: Bayfield Go. Zoning D						Township: Gov. Lot #:					
P.O.BOX 10	_				RUSS						
City, State るみてアバモムカ		Zip Co		hone Nui	<b>I</b>	Blo	ock #:	Subdivi	sion Nar	ne or CSN	VI #:
II. TYPE OF BUILI			7  //3	5-779-	20()						
State Owned			<u>, cto.vt</u>	im / ci	Parcel ID						-
State Owned  Construction Starge Parcel ID  Tax Number(s): 04-096-2-51-04-26-1 01-000-20000											
1 or 2 Family Dwelling - No. of Bedrooms											
III. TYPE OF PERMIT: (Check only one box on line A. Check box on line B, if applicable)											
A) V New		Repl	acement		County Private Inte	erceptor					
Recon	ection	Rep	air	R	tevision ** [	Transfer	of Owner (L	ist Previo	ous Owr	ner below	n)
		_ '			<b></b>		<b>(</b>				′
		-,									<del></del>
					evious Permit Nu						<del></del>
IV. TYPE OF NON	PLUMBING	SYSTEM:	: (Check C	⊃ne) *Ri	eplacements need	d previous p	ermit numbe	r and date	e filled or	ut above	
C) Pit Pri	vv [	ロ Vault P	rivv (Va	ault size:	<u>250 g</u> allons or	cubic	vards)				
	• <i>,</i>		,	adic oillo.	<u>se v g</u> anona or		yurus)				
Portal	ole Privy	Campir	ng Transfe	r Unit Co	ontainer	Composting	g Toilets	Inc	inerating	Toilet	
V. ABSORPTION	SYSTEMIN	FORMATIO	DN:						100 SAN DESCRIPTION OF THE SAN DESCRIPTION OF		
	control of the second s	the first teachers and the first teachers and the first teachers and the first teachers are	The Court of the C	60090000000000000000000000000000000000							
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1. Gallons 2.	control of the second s	a 3.	The Court of the C		4. Loading Rate (Gals. / Day / Sq.		erc. Rate lin. Inch)		m (Feet)	7. Final ( Elev. (	I .
1. Gallons 2. Per Day	Absorp. Area Required (So Capacity	a 3. q.Ft.) Pro	Absorp. A oposed (So	q. Ft.)	(Gals. / Day / Sq.	.Ft.) (N					I .
1. Gallons 2. Per Day	Absorp. Area Required (So Capacity In Gallons	a 3. q.Ft.) Pro	Absorp. A oposed (So	q. Ft.) # of	(Gals. / Day / Sq. Manufacturer's	.Ft.) (M	(In. Inch)	Elev.(	(Feet)		Feet)
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- 1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
- Show the approximate location and size of the building. 2.
- 3. Show the location of the well, septic tank and drain field.
- 4. Show the location of any lake, river, stream or pond if applicable.
- 5. Show the approximate location of other existing structures.
- 6. Show the approximate location of any wetlands or slopes over 20 percent.
- 7. Show dimensions in feet on the following:
  - Building to all lot lines
  - Building to centerline of road
  - c. Building to lake, river, stream or pond NIA
  - d. Septic / holding tank to closest lot line 1914
  - e. Septic/holding tank to building MA
  - 125 FT
  - Septic / holding tank to well
  - Septic / holding tank to lake, river, stream or pond with o.
  - Privy to closest lot line 🏋 FT

- Privy to building 60F1
- Privy to lake, river, stream or pond n/9

IS NECESSARY, FOLLOW

- k. Drain field to closest lot line n/ a
- Drain field to building p/a
- m. Drain field to well nla
- Drain field to lake, river, stream or pond of stream

**IMPORTANT DETAILED PLOT PLAN** 

STEPS 1-7 (a-o) COMPLETELY

Well to building 60 FT

Submit To: Bayfield County Zoning Department, PO Box 58, Washburn, WI 54891